REQUEST FOR CIVILIAN PERSONNEL ACTION									
Requesting Official (Last,				Date of Request:					
PSD/CSD of Requesting	DSN Office Phone:			What Action Are you Requesting?					
PSD/CSD of Requesting Official:		DSN Office Priorie.				What Action Are you requesting:			
Email Address of Requesting Official:		DSN Office FAX:			Other (provide specifics):				
If requesting Recruit Action, provide the following information:									
Position Title:		Series: Grade:				Location:			
1 ostion ride.		Genes.		Grade.		Location.			
PD Number:									
Listification									
Justification:									
If requesting New Position, provide the following information:									
Proposed Position Title: Proposed Series: Proposed Grade:						Proposed Location:			
Troposed Federal Files		Tropodod Corioo		Troposca Grade.		l repecca zecanem			
Justification:									
If you are requesting Detail Action, Reassignment Action or Promote Action, provide the following information:									
Name of employee:	Proposed			Effective Date:					
From Current Position Title:		Series: Grad		de: PD Numbe		r: Current Location:			
Fight Current Position Title.		Series: Gra		de: PD Numbe		1. Current Location.		ent Location.	
To Position Title:		Series: Gr		de:	PD Numbe	D Number:		Location:	
Justification:					I.				
Recommendation Signature		Recommend		Not Re	Not Recommended		Date		
First Line Sup	<u> </u>								
Second Line Sup									
OIC/CPOIC									
OIC/CPOIC									
Approval Auth Signature		Approved		roved	Disapproved			Date	
CIVPERS Officer		7.66.0100			2.oupprovou				
CIVPERS Officer Comments:									
DDI Nombre									
PPI Number:									